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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET					Application Number 10/579,769			Filing Date 24 July, 2006			☐ To be Mailed		
	Substitute	e for Form I with Form P	PTO-1360		Applicant(s) STAEHLER ET AL.						Page 1 of 1		
					* May be used for additional claims or amendm						ents		
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SEC. AMENDMENT		*		*		*		
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1	1						51						
2	1	1					52						
3		1					53 54						
5		1					55						
6		1					56						
7		1					57						
8		1					58 59						
10		1					60						
11		1					61						
12		1					62						
13 14		1					63 64						
15		1					65						
16		1					66						
17		1					67						
18 19		1					68						
20		1					70						
21		1					71						
22		1					72						
23		1					73						
24 25		1					74 75						
26		1					76						
27		1					77						
28		1					78						
29 30		1					79 80						
31		1					81						
32		1					82						
33		1					83						
34 35							84 85						
36							86						
37							87						
38							88						
39 40							89 90						
41							90						
42							92						
43							93			_			
44 45							94 95						
45 46							96						
47							97						
48							98						
49							99 100						
50 Total	2						100 Total						
Indep							Indep						
Total		31					Total						
Depend Total	2	33					Depend Total						
Claims		,,					Claims						

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